

APR. 20. 2004 3:46PM

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To:	AU 1614	From:	Leonard R. Svensson
Fax:	703-872-9306	Pages:	6 including cover sheet
Phone:		Date:	April 20, 2004
Your Ref.:	10/725,657	Our Ref.:	1718-0209P
Re:	Supplemental Application Data Sheet	CC:	

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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● **Comments:**

APPLICATION DATA SHEET**APPLICATION INFORMATION**

Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?:: None
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: Compounds and Methods for Inhibition of HIV and
Related Viruses
Attorney Docket Number:: 1718-0209P
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: None
Total Drawing Sheets:: 0
Small Entity?:: No
Petition Included?:: No
Petition Type::

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship:: Swedish
Country:: SWEDEN
Status:: Full Capacity
Given Name:: Peter
Middle Name:: Thomas
Family Name:: LIND

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City of Residence:: Huddinge
State or Province of Residence::
Country of Residence:: SWEDEN
Street of mailing address:: Lillskogsvagen 6

City of mailing address:: Huddinge
State or Province of mailing address::
Country of mailing address:: SWEDEN
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship:: Swedish
Country:: SWEDEN
Status:: Full Capacity
Given Name:: Rolf
Middle Name::
Family Name:: NOREEN
City of Residence:: Huddinge
State or Province of Residence::
Country of Residence:: SWEDEN
Street of mailing address:: Visattravagen 65

City of mailing address:: Huddinge
State or Province of mailing address::
Country of mailing address:: SWEDEN
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship:: United States
Country:: United States
Status:: Full Capacity

Given Name:: John
Middle Name:: Michael
Family Name:: MORIN
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State or Province of Residence:: Indiana
Country of Residence:: United States
Street of mailing address:: 9 Roselawn Ave.

City of mailing address:: Brownsburg
State or Province of mailing address:: Indiana
Country of mailing address:: United States
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Applicant Authority Type:: Inventor
Primary Citizenship:: United States
Country:: United States
Status:: Full Capacity
Given Name:: Robert
Middle Name:: John
Family Name:: TERNANSKY
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State or Province of Residence:: California
Country of Residence:: United States
Street of mailing address:: 3469 Camino Valencia

City of mailing address:: Carlsbad
State or Province of mailing address:: California
Country of mailing address:: United States
Postal or Zip Code of mailing address:: CA 92009

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 02292

REPRESENTATIVE INFORMATION

Representative Customer Number::	02292
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DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Division of	10/076,163	12/13/03
which is a	Division of	09/567,857	05/09/00
which is a	Continuation of	09/114,935	07/14/03
which is a	Division of	08/601,030	05/03/96

FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
PCT	PCT/US94/09406	08/24/94	Yes

ASSIGNEE INFORMATION

Assignee Name:: Medivir AB

Street of mailing address:: Lunastigen 7

City of mailing address:: Huddinge

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NO. 1327 P. 6

State or Province of mailing address::

Country of mailing address:: SWEDEN

Postal or Zip Code of mailing address:: S-141 44

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